

Appendix 4

Reference Guide to AVR and Commercial Eligibility Verification Vendor Responses

To access the Automated Voice Response (AVR) system, call (800) 947-3544 or (608) 221-4247. Providers may also access the Eligibility Verification System (EVS) from the recipient's ID card by using a magnetic stripe reader (point-of-service device or terminal) or personal computer software. The following chart shows the response information AVR and commercial eligibility verification vendors give to providers. In addition to the information listed below, providers may inquire about checkwrite information, claim status, and prior authorization request status through AVR.

AVR Eligibility Response Includes:	Commercial Eligibility Verification Vendor Response Includes:
Audio response only.	Printed transaction response for your records.
Transaction log number to keep for records.	Transaction log number to keep for records.
Recipient information: <ul style="list-style-type: none"> • Medicaid ID number. • Date of birth. • County code indicating the county in which the recipient resides. 	Recipient information: <ul style="list-style-type: none"> • Medicaid ID number. • Name. • Date of birth. • Gender. • Recipient medical status code. • County in which the recipient was certified.
Eligibility information for the current benefit month and previous 12 months.	Eligibility information for the current benefit month and previous 12 months.
Limited benefit messages (if applicable).	Limited benefit messages (if applicable).
Health Personnel Shortage Area (HPSA) message (if applicable).	Health Personnel Shortage Area (HPSA) message (if applicable).
Medicaid managed care messages: <ul style="list-style-type: none"> • Managed care program two-digit code. • Managed care program name. • Managed care 24-hour telephone number. • Included services: chiropractic, dental, neither or both. 	Medicaid managed care messages: <ul style="list-style-type: none"> • Managed care program two-digit code. • Managed care program name. • Managed care 24-hour telephone number. • Included services: chiropractic, dental, neither or both.
Medicare messages: <ul style="list-style-type: none"> • Coverage description: Part A, Part B, or Parts A and B. • Medicare health insurance claim (HIC) number. 	Medicare messages: <ul style="list-style-type: none"> • Coverage description: Part A, Part B, or Parts A and B. • Medicare health insurance claim (HIC) number.
Lock-In messages (if applicable): <ul style="list-style-type: none"> • Lock-In effective dates. • Multiple categories of service: pharmacy, physician, dental, HealthCheck, outpatient hospital, medical vendor, institution, hospice. 	Lock-In messages (if applicable): <ul style="list-style-type: none"> • Lock-In effective dates and provider name and telephone number. • Multiple categories of service: pharmacy, physician, dental, HealthCheck, outpatient hospital, medical vendor, institution, hospice.
Other commercial health insurance messages: <ul style="list-style-type: none"> • Coverage effective dates. • Coverage type: medical, dental, pharmacy, or combination. • Coverage indicator: HMO, HMP, HPP, BLU, WPS, CHA, OTH, or DEN to use for billing. • Carrier name, address, and telephone number. • Recipient's relationship to insured: self, spouse, etc. • Policyholder's Social Security number. • Policy and group numbers. 	Other commercial health insurance messages: <ul style="list-style-type: none"> • Coverage effective dates. • Coverage type: pharmacy, physician, dental, inpatient hospital, outpatient hospital, nursing home, vision, DME rental, DME purchase, home health. • Coverage indicator: HMO, HMP, HPP, BLU, WPS, CHA, OTH, or DEN to use for billing. • Carrier code, name, and address. • Policyholder's Social Security number and name. • Policy and group numbers.